

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

16772937

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5		3				
6		3				
7		3				
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49						
50						
TOTAL IND.	1					
TOTAL DEP.	15					
TOTAL CLAIMS	16					

	IND		DEP		IND		DEP	
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.								
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TOTAL CLAIMS								